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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Art Unit: 1636
Peter K. Law :
Application No.: 10/523,969 : Confirmation No.: 3987
Filing Date: October 7, 2005 : Examiner: To be assigned
For: MECHANISMS OF MYOBLAST TRANSFER : Attorney Docket:
IN TREATING HEART FAILURE : LAW.020.0006.PC

**SUBMISSION OF REVOCATION OF POWER OF ATTORNEY WITH NEW POWER
OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

An attached, properly signed and dated revocation of power of attorney with new power of attorney and change of correspondence address is submitted for application serial number 10/523,969.

Please send all correspondence to the address associated with customer number 58789, as directed on the attached form SB/82.

Please contact Marvin Motsenbocker at 202-659-0100 if there are any questions.

Thank you.

Respectfully submitted,

Marvin A. Motsenbocker
Reg. No. 36,614

March 15, 2007

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PTO/SB/82 (01-08)

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/523,969
	Filing Date	10/07/2005
	First Named Inventor	Peter K. LAW
	Art Unit	1636
	Examiner Name	To be assigned
	Attorney Docket Number	LAW.020.0006.PC

I hereby revoke all previous powers of attorney given in the above-identified application.			
<input type="checkbox"/> A Power of Attorney is submitted herewith.			
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<input checked="" type="checkbox"/> Applicant/Inventor.			
<input type="checkbox"/> Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)			
SIGNATURE of Applicant or Assignee of Record			
Signature	<i>Peter K. Law</i>		
Name	Peter K. LAW		
Date	8/14/07	Telephone	1-805-508-2021
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
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